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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/550,532	09/22/2005	Le T. Duong	21259YP	3180
MERCK AND	7590 06/30/200 CO., INC	EXAMINER		
PO BOX 2000			HUANG, GIGI GEORGIANA	
RAHWAY, NJ 07065-0907			ART UNIT	PAPER NUMBER
			1612	
			MAIL DATE	DELIVERY MODE
			06/30/2008	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Intonvious Sumamons	10/550,532	DUONG ET AL.			
Interview Summary	Examiner	Art Unit			
	GIGI HUANG	1612			
All participants (applicant, applicant's representative, PTO	personnel):				
(1) <u>GIGI HUANG</u> .	(3)				
(2) <u>Patricia Shatynski</u> .	(4)				
Date of Interview: 27 May 2008.					
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2	2)∏ applicant's representative	e]			
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.				
Claim(s) discussed: <u>N/A</u> .					
Identification of prior art discussed: <u>N/A</u> .					
Agreement with respect to the claims f) was reached. g)∏ was not reached. h)⊠ N	VA.			
Substance of Interview including description of the general reached, or any other comments: <u>confirmed abandonment</u>		if an agreement was			
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no c allowable is available, a summary thereof must be attached	opy of the amendments that w				
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INT FILE A STATEMENT OF THE SUBSTANCE OF THE INTE requirements on reverse side or on attached sheet.	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM,	been filed, APPLICANT IS Y DAYS FROM THIS WHICHEVER IS LATER, TO			
	/GiGi Huang/ Examiner, Art Unit 1612				
Examiner Note: You must sign this form unless it is an	Examiner's signature, if requi	red			

Application No.

Applicant(s)